

# Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

**2002**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

The organization may have to use a copy of this return to satisfy state reporting requirements.

**A** For the 2002 calendar year, or tax year period beginning **JUL 1, 2002** and ending **JUN 30, 2003**

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization <b>THE HELPING UP MISSION, INC.</b>	<b>D</b> Employer identification number <b>52-0635090</b>
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite <b>1029 E. BALTIMORE STREET</b>	<b>E</b> Telephone number <b>(410) 675-5016</b>
	City or town, state or country, and ZIP + 4 <b>BALTIMORE, MD 21202</b>	<b>F</b> Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify)

Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

**H** and **I** are not applicable to section 527 organizations.

**H(a)** Is this a group return for affiliates?  Yes  No

**H(b)** If "Yes," enter number of affiliates: \_\_\_\_\_

**H(c)** Are all affiliates included? **N/A**  Yes  No (If "No," attach a list.)

**H(d)** Is this a separate return filed by an organization covered by a group ruling?  Yes  No

**I** Enter 4-digit GEN: \_\_\_\_\_

**G** Web site: **N/A**

**J** Organization type (check only one)  501(c) ( **3** ) (Insert no.)  4947(a)(1) or  527

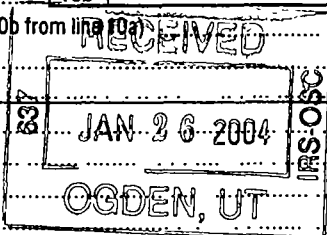
**K** Check here  if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS; but if the organization received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return.

**L** Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 **2,146,888.**

**M** Check  if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances**

Revenue	<b>1</b> Contributions, gifts, grants, and similar amounts received:			
	<b>a</b> Direct public support	1a	1,630,477.	
	<b>b</b> Indirect public support	1b		
	<b>c</b> Government contributions (grants)	1c		
	<b>d</b> Total (add lines 1a through 1c) (cash \$ <b>1,142,228.</b> noncash \$ <b>488,249.</b> )	1d		1,630,477.
	<b>2</b> Program service revenue including government fees and contracts (from Part VII, line 93)	2		366,437.
	<b>3</b> Membership dues and assessments	3		
	<b>4</b> Interest on savings and temporary cash investments	4		
	<b>5</b> Dividends and interest from securities	5		7,516.
	<b>6 a</b> Gross rents	6a		
	<b>b</b> Less: rental expenses	6b		
	<b>c</b> Net rental income or (loss) (subtract line 6b from line 6a)	6c		
<b>7</b> Other investment income (describe)	7			
<b>8 a</b> Gross amount from sale of assets other than inventory	(A) Securities	8a		
	138,918.	8a		
	b Less: cost or other basis and sales expenses	8b		
	165,225.	8b		
<b>c</b> Gain or (loss) (attach schedule)	8c			
<b>d</b> Net gain or (loss) (combine line 8c, columns (A) and (B))	8d	STMT 1	-26,307.	
<b>9</b> Special events and activities (attach schedule)				
<b>a</b> Gross revenue (not including \$ _____ of contributions reported on line 1a)	9a			
<b>b</b> Less: direct expenses other than fundraising expenses	9b			
<b>c</b> Net income or (loss) from special events (subtract line 9b from line 9a)	9c			
<b>10 a</b> Gross sales of inventory, less returns and allowances	10a			
	<b>b</b> Less: cost of goods sold	10b		
	<b>c</b> Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c		
<b>11</b> Other revenue (from Part VII, line 103)	11		3,540.	
<b>12</b> Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12		1,981,663.	
Expenses	<b>13</b> Program services (from line 44, column (B))	13		1,292,554.
	<b>14</b> Management and general (from line 44, column (C))	14		220,658.
	<b>15</b> Fundraising (from line 44, column (D))	15		450,034.
	<b>16</b> Payments to affiliates (attach schedule)	16		
	<b>17</b> Total expenses (add lines 16 and 44, column (A))	17		1,963,246.
Net Assets	<b>18</b> Excess or (deficit) for the year (subtract line 17 from line 12)	18		18,417.
	<b>19</b> Net assets or fund balances at beginning of year (from line 73, column (A))	19		1,424,042.
	<b>20</b> Other changes in net assets or fund balances (attach explanation)	20	SEE STATEMENT 2	36,817.
	<b>21</b> Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21		1,479,276.



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**Part II Statement of Functional Expenses** All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others Page 2

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule)				
	cash \$ _____ noncash \$ _____	22			
23	Specific assistance to individuals (attach schedule)	23			
24	Benefits paid to or for members (attach schedule)	24			
25	Compensation of officers, directors, etc.	25	70,477.	52,858.	3,524.
26	Other salaries and wages	26	391,269.	223,519.	96,206.
27	Pension plan contributions	27			
28	Other employee benefits	28			
29	Payroll taxes	29			
30	Professional fundraising fees	30			
31	Accounting fees	31			
32	Legal fees	32			
33	Supplies	33	60,152.	45,915.	12,591.
34	Telephone	34	27,222.	17,181.	8,556.
35	Postage and shipping	35	18,973.	827.	1,495.
36	Occupancy	36			
37	Equipment rental and maintenance	37	16,231.	456.	7,524.
38	Printing and publications	38	1,247.	1,110.	
39	Travel	39			
40	Conferences, conventions, and meetings	40	6,489.	5,710.	
41	Interest	41	19,302.	18,144.	772.
42	Depreciation, depletion, etc. (attach schedule)	42	77,634.	72,976.	3,105.
43	Other expenses not covered above (itemize):				
	a _____	43a			
	b _____	43b			
	c _____	43c			
	d _____	43d			
	e <b>SEE STATEMENT 3</b>	43e	1,274,250.	853,858.	86,885.
44	Total functional expenses (add lines 22 through 43). Organizations completing columns (B)-(D), carry these totals to lines 13-15	44	1,963,246.	1,292,554.	220,658.

Joint Costs. Check  if you are following SOP 98-2.  
 Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services?  Yes  No  
 If "Yes," enter (i) the aggregate amount of these joint costs \$ \_\_\_\_\_; (ii) the amount allocated to Program services \$ \_\_\_\_\_;  
 (iii) the amount allocated to Management and general \$ \_\_\_\_\_; and (iv) the amount allocated to Fundraising \$ \_\_\_\_\_

**Part III Statement of Program Service Accomplishments**

What is the organization's primary exempt purpose? <b>SEE STATEMENT 4</b>		<b>Program Service Expenses</b> <small>(Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts, but optional for others.)</small>
<small>All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)</small>		
a	<b>BASIC MISSION SERVICES - PROVIDE FOOD, SHELTER, COUNSELING AND RECOVERY SERVICES FOR THE NEEDY AND HOMELESS.</b>	
	(Grants and allocations \$ _____)	1,057,213.
b	<b>THRIFT STORE</b>	
	(Grants and allocations \$ _____)	235,341.
c	_____	
	(Grants and allocations \$ _____)	
d	_____	
	(Grants and allocations \$ _____)	
e	Other program services (attach schedule)	(Grants and allocations \$ _____)
f	<b>Total of Program Service Expenses (should equal line 44, column (B), Program services)</b>	<b>1,292,554.</b>

**Part IV Balance Sheets**

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year	(B) End of year
<b>Assets</b>	45 Cash - non-interest-bearing		45
	46 Savings and temporary cash investments	91,214.	46 160,548.
	47 a Accounts receivable	47a	
	b Less: allowance for doubtful accounts	47b	47c
	48 a Pledges receivable	48a	
	b Less: allowance for doubtful accounts	48b	48c
	49 Grants receivable		49
	50 Receivables from officers, directors, trustees, and key employees		50
	51 a Other notes and loans receivable	51a	
	b Less: allowance for doubtful accounts	51b	51c
	52 Inventories for sale or use		52
	53 Prepaid expenses and deferred charges		53
	54 Investments - securities <b>STMT 5</b> <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	433,695.	54 386,683.
	55 a Investments - land, buildings, and equipment: basis	55a	
	b Less: accumulated depreciation	55b	55c
56 Investments - other		56	
57 a Land, buildings, and equipment: basis	57a 2,068,676.		
b Less: accumulated depreciation <b>STMT 6</b>	57b 468,404.	57c 1,600,272.	
58 Other assets (describe <b>SEE STATEMENT 7</b> )	110.	58 21,183.	
<b>59 Total assets (add lines 45 through 58) (must equal line 74)</b>	<b>2,015,115.</b>	<b>59 2,168,686.</b>	
<b>Liabilities</b>	60 Accounts payable and accrued expenses	95,860.	60 96,221.
	61 Grants payable		61
	62 Deferred revenue		62
	63 Loans from officers, directors, trustees, and key employees		63
	64 a Tax-exempt bond liabilities		64a
	b Mortgages and other notes payable	446,000.	64b 437,255.
	65 Other liabilities (describe <b>SEE STATEMENT 8</b> )	49,213.	65 155,934.
<b>66 Total liabilities (add lines 60 through 65)</b>	<b>591,073.</b>	<b>66 689,410.</b>	
<b>Net Assets or Fund Balances</b>	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.		
	67 Unrestricted	1,424,042.	67 1,479,276.
	68 Temporarily restricted		68
	69 Permanently restricted		69
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.		
	70 Capital stock, trust principal, or current funds		70
	71 Paid-in or capital surplus, or land, building, and equipment fund		71
	72 Retained earnings, endowment, accumulated income, or other funds		72
<b>73 Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72; column (A) must equal line 19; column (B) must equal line 21)</b>	<b>1,424,042.</b>	<b>73 1,479,276.</b>	
<b>74 Total liabilities and net assets / fund balances (add lines 66 and 73)</b>	<b>2,015,115.</b>	<b>74 2,168,686.</b>	

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.



Part VI Other Information

Table with columns for question number, question text, and Yes/No columns. Includes questions 76 through 91 regarding organizational activities, financials, and governance.

Located at 1029 E. BALTIMORE STREET., BALTIMORE, MD ZIP + 4 21202

92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here and enter the amount of tax-exempt interest received or accrued during the tax year

**Part VII Analysis of Income-Producing Activities** (See page 31 of the instructions.)

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
<b>Note:</b> Enter gross amounts unless otherwise indicated.					
93 Program service revenue:					
a <u>LODGING</u>					253,801.
b <u>THRIFT STORE</u>			05	112,636.	
c _____					
d _____					
e _____					
f Medicare/Medicaid payments .....					
g Fees and contracts from government agencies .....					
94 Membership dues and assessments .....					
95 Interest on savings and temporary cash investments ...					
96 Dividends and interest from securities .....			14	7,516.	
97 Net rental income or (loss) from real estate:					
a debt-financed property .....					
b not debt-financed property .....					
98 Net rental income or (loss) from personal property .....					
99 Other investment income .....					
100 Gain or (loss) from sales of assets other than inventory .....			18	-26,307.	
101 Net income or (loss) from special events .....					
102 Gross profit or (loss) from sales of inventory .....					
103 Other revenue:					
a <u>MISCELLANEOUS</u>					3,540.
b _____					
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E)) .....		0.		93,845.	257,341.
105 Total (add line 104, columns (B), (D), and (E)) .....					351,186.

Note: Line 105 plus line 1c, Part I, should equal the amount on line 12, Part I.

**Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes** (See page 32 of the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
▼	SEE STATEMENT 10

**Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities** (See page 32 of the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			
	%			
	%			
	%			

**Part X Information Regarding Transfers Associated with Personal Benefit Contracts** (See page 33 of the instructions.)

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Yes  No
- (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  Yes  No

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

I am preparing this return accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and I am not aware of any information of which preparer has any knowledge.

Date: 1-20-04      Type or print name and title: Robert A. Gehman

Date: \_\_\_\_\_      Check if self:       Preparer's SSN or PTIN: \_\_\_\_\_

**SCHEDULE A**  
(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

**Organization Exempt Under Section 501(c)(3)**

(Except Private Foundation) and Section 501(a), 501(f), 501(k),  
501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

**Supplementary Information-(See separate instructions.)**  
▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

OMB No 1545-0047

**2002**

Name of the organization

THE HELPING UP MISSION, INC.

Employer identification number

52 0635090

**Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees**

(See page 1 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE		0.	0.	0.
Total number of other employees paid over \$50,000	0			

**Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services**

(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
RUSS REID COMPANY		
1029 E. BALTIMORE STREET BALTIMORE, MD 21202	FUNDRAISING	523,759.
U.S.A. DIRECT INC		
1029 E. BALTIMORE STREET BALTIMORE, MD 21202	FUNDRAISING	63,580.
Total number of others receiving over \$50,000 for professional services	0	

**Part III Statements About Activities** (See page 2 of the instructions.)

	Yes	No
1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities <b>▶</b> \$ _____ \$ _____ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.		X
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)		
a Sale, exchange, or leasing of property?		X
b Lending of money or other extension of credit?		X
c Furnishing of goods, services, or facilities?		X
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? <b>SEE PART V, FORM 990</b>	X	
e Transfer of any part of its income or assets?		X
3 Does the organization make grants for scholarships, fellowships, student loans, etc.? (See Note below.)		X
4 Do you have a section 403(b) annuity plan for your employees?		X
<b>Note:</b> Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs "qualify" to receive payments.		

**Part IV Reason for Non-Private Foundation Status** (See pages 3 through 5 of the instructions.)

The organization is not a private foundation because it is: (Please check only **ONE** applicable box.)

- 5  A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6  A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
- 7  A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8  A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9  A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state **▶** \_\_\_\_\_
- 10  An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
- 11a  An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 11b  A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 12  An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the **Support Schedule** in Part IV-A.)
- 13  An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in: (1) lines 5 through 12 above; or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). (See section 509(a)(3).)

Provide the following information about the supported organizations. (See page 5 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Line number from above

- 14  An organization organized and operated to test for public safety. Section 509(a)(4). (See page 5 of the instructions.)

**Part IV-A Support Schedule** (Complete only if you checked a box on line 10, 11, or 12.) Use cash method of accounting.  
 Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in)	(a) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	1,793,312.	1,798,792.	1,553,347.	1,781,775.	6,927,226.
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	185,094.	159,115.	129,333.	128,470.	602,012.
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	13,759.	65,599.	44,902.	44,833.	169,093.
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets	7,953.	3,059.	SEE STATEMENT 11 4,669.	9,440.	25,121.
23 Total of lines 15 through 22	2,000,118.	2,026,565.	1,732,251.	1,964,518.	7,723,452.
24 Line 23 minus line 17	1,815,024.	1,867,450.	1,602,918.	1,836,048.	7,121,440.
25 Enter 1% of line 23	20,001.	20,266.	17,323.	19,645.	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24					26a 142,429.
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1998 through 2001 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the sum of all these excess amounts					26b 0.
c Total support for section 509(a)(1) test: Enter line 24, column (e)					26c 7,121,440.
d Add: Amounts from column (e) for lines: 18 169,093. 19 _____ 22 25,121. 26b _____					26d 194,214.
e Public support (line 26c minus line 26d total)					26e 6,927,226.
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f 97.2728%
27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year: N/A (2001) _____ (2000) _____ (1999) _____ (1998) _____					
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: N/A (2001) _____ (2000) _____ (1999) _____ (1998) _____					
c Add. Amounts from column (e) for lines: 15 _____ 16 _____ 17 _____ 20 _____ 21 _____					27c N/A
d Add: Line 27a total _____ and line 27b total _____					27d N/A
e Public support (line 27c total minus line 27d total)					27e N/A
f Total support for section 509(a)(2) test. Enter amount on line 23, column (e)					27f N/A
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g N/A %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h N/A %

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 1998 through 2001, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

**Part V Private School Questionnaire** (See page 7 of the instructions.)

N/A

(To be completed ONLY by schools that checked the box on line 6 in Part IV)

		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? .....		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? .....		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? .....		
	If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)		
32	Does the organization maintain the following:		
a	Records indicating the racial composition of the student body, faculty, and administrative staff? .....		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? .....		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? .....		
d	Copies of all material used by the organization or on its behalf to solicit contributions? .....		
	If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)		
33	Does the organization discriminate by race in any way with respect to:		
a	Students' rights or privileges? .....		
b	Admissions policies? .....		
c	Employment of faculty or administrative staff? .....		
d	Scholarships or other financial assistance? .....		
e	Educational policies? .....		
f	Use of facilities? .....		
g	Athletic programs? .....		
h	Other extracurricular activities? .....		
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)		
34 a	Does the organization receive any financial aid or assistance from a governmental agency? .....		
b	Has the organization's right to such aid ever been revoked or suspended? .....		
	If you answered "Yes" to either 34a or b, please explain using an attached statement.		
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation .....		

**Part VI-A Lobbying Expenditures by Electing Public Charities** (See page 9 of the instructions)

N/A

(To be completed ONLY by an eligible organization that filed Form 5768)

Check  a if the organization belongs to an affiliated group. Check  b if you checked "a" and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
		N/A	
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37	
38	Total lobbying expenditures (add lines 36 and 37)	38	
39	Other exempt purpose expenditures	39	
40	Total exempt purpose expenditures (add lines 38 and 39)	40	
41	Lobbying nontaxable amount. Enter the amount from the following table -		
	If the amount on line 40 is -		
	The lobbying nontaxable amount is -		
	Not over \$500,000	20% of the amount on line 40	
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	
	Over \$17,000,000	\$1,000,000	
42	Grassroots nontaxable amount (enter 25% of line 41)	42	
43	Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43	
44	Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44	

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.

**4-Year Averaging Period Under Section 501(h)**

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50 on page 11 of the instructions.)

Calendar year (or fiscal year beginning in)	Lobbying Expenditures During 4-Year Averaging Period				N/A (e) Total
	(a) 2002	(b) 2001	(c) 2000	(d) 1999	
45	Lobbying nontaxable amount				0.
46	Lobbying ceiling amount (150% of line 45(e))				0.
47	Total lobbying expenditures				0.
48	Grassroots nontaxable amount				0.
49	Grassroots ceiling amount (150% of line 48(e))				0.
50	Grassroots lobbying expenditures				0.

**Part VI-B Lobbying Activity by Nonelecting Public Charities**

(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions.)

N/A

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	Yes	No	Amount
a Volunteers			
b Paid staff or management (Include compensation in expenses reported on lines c through h.)			
c Media advertisements			
d Mailings to members, legislators, or the public			
e Publications, or published or broadcast statements			
f Grants to other organizations for lobbying purposes			
g Direct contact with legislators, their staffs, government officials, or a legislative body			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means			
i Total lobbying expenditures (Add lines c through h.)			0.

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.



2002 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 2

990

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Amount Of Depreciation
1	FIXED ASSETS (SEE ATTACHED DETAIL)	VARIES	VAR	.000	16	2068676.			2068676.	390,770.		77,634.
2				.000	16							0.
3	* TOTAL 990 PAGE 2 DEPR			.000	16	2068676.		0.	2068676.	390,770.	0.	77,634.

**Helping Up Mission  
Depreciation Expense [Depreciation]  
GAAP  
For the Period July 1, 2002 to June 30, 2003**

Asset ID	Placed in service	Depr Meth/Conv	Life Yr Mo	Book Cost	Depr & AFYD This Period	YEAR TO DATE				
						Beginning Accum Depr	Current Depr & AFYD	Net Sec 179/Sec 179A	Net Additions Deletions	Ending Accum Depr
<i>Asset GL Acct #: (no value)</i>										
HUM001290	Computers									
	05/20/2003	SL100FM	10 0	2,391.06	39.85	0.00	39.85	0.00	0.00	39.85
<i>Subtotal: (no value) (1)</i>				2,391.06	39.85	0.00	39.85	0.00	0.00	39.85
<i>Asset GL Acct #: 1000</i>										
HUM001040	GBMC BUILDING									
	05/08/2001	SL100MHM	40 0	365,692.87	9,142.32	10,666.04	9,142.32	0.00	0.00	19,808.36
HUM001090	Plumbing an dengineering									
	12/31/2000	SL100HY	15 0	3,690.00	246.00	369.00	246.00	0.00	0.00	615.00
HUM001150	Architect and Engineering - GBMC									
	02/04/2002	SL100MHM	15 0	11,600.90	773.39	322.25	773.39	0.00	0.00	1,095.64
<i>Subtotal: 1000 (3)</i>				380,983.77	10,161.71	11,357.29	10,161.71	0.00	0.00	21,519.00
<i>Asset GL Acct #: 1005</i>										
HUM000240	Chevrolet Truck									
	11/08/1994	SL100MHM	5 0	24,360.95	0.00	24,360.95	0.00	0.00	-24,360.95	0.00
HUM000770	1999 Van									
	03/31/1999	SL100HY	5 0	21,395.25	4,279.05	13,906.93	4,279.05	0.00	0.00	18,185.98
HUM000870	1993 PLYMOUTH VAN									
	03/21/2000	SL100MHY	5 0	4,000.00	800.01	1,800.00	800.01	0.00	-2,600.01	0.00
HUM001120	Donated vehicle Old's Van 1991									
	04/30/2002	SL100MHM	3 0	2,250.00	750.00	125.00	750.00	0.00	0.00	875.00
HUM001130	Donated vehicle - Dodge Van 1990									
	04/30/2002	SL100MHM	3 0	1,500.00	500.00	83.33	500.00	0.00	-583.33	0.00
HUM001140	Donated vehicle - Chevy Wagon 1989									
	04/30/2002	SL100MHM	3 0	775.00	258.33	43.06	258.33	0.00	-301.39	0.00
HUM001220	Van - Chesapeake Truck Sales									
	11/01/2002	SL100FM	5 0	26,671.90	3,556.25	0.00	3,556.25	0.00	0.00	3,556.25
Less Disposals	Adjustment to ellminate cost values of disposed assets									
				-30,635.95						
<i>Subtotal: 1005 (8)</i>				50,317.15	10,143.64	40,319.27	10,143.64	0.00	-27,845.68	22,617.23
<i>Asset GL Acct #: 1007</i>										
HUM000030	VARIOUS									
	12/31/1990	SL100MHM	5 0	50,000.00	0.00	50,000.00	0.00	0.00	0.00	50,000.00
HUM000040	DISHWASHER									
	12/30/1991	SL100MHM	3 0	1,500.00	0.00	1,500.00	0.00	0.00	-1,500.00	0.00
HUM000050	NIKON CAMERA									
	12/30/1991	SL100MHM	3 0	719.98	0.00	719.98	0.00	0.00	-719.98	0.00
HUM000060	CELLULAR PHONE									
	02/15/1992	SL100MHM	3 0	300.00	0.00	300.00	0.00	0.00	0.00	300.00
HUM000070	WASHER									
	04/15/1992	SL100MHM	3 0	5,600.00	0.00	5,600.00	0.00	0.00	0.00	5,600.00
HUM000110	AIR CONDITIONER									
	09/08/1992	SL100MHM	10 0	17,490.00	291.50	17,198.50	291.50	0.00	0.00	17,490.00
HUM000120	COMPUTER									
	05/26/1993	SL100MHM	5 0	2,322.00	0.00	2,322.00	0.00	0.00	0.00	2,322.00
HUM000180	EQUIPMENT (CIRCUIT CITY)									
	11/22/1993	SL100MHM	5 0	2,669.87	0.00	2,669.87	0.00	0.00	0.00	2,669.87
HUM000200	COMPUTER UPGRADE									
	03/31/1994	SL100MHM	3 0	667.00	0.00	667.00	0.00	0.00	0.00	667.00
HUM000230	COMPAQ									
	08/12/1994	SL100MHM	5 0	1,746.00	0.00	1,746.00	0.00	0.00	-1,746.00	0.00
HUM000300	SATELLITE TV									
	05/05/1995	SL100MHM	5 0	1,097.41	0.00	1,097.41	0.00	0.00	-1,097.41	0.00
HUM000390	POLAROID CAMERA									

Asset ID	Placed in service	Depr Meth/Conv	Life Yr Mo	Book Cost	Depr & AFYD This Period	YEAR TO DATE				
						Beginning Accum Depr	Current Depr & AFYD	Net Sec 179/Sec 179A	Net Additions Deletions	Ending Accum Depr
<i>Asset GL Acct #: 1007</i>										
HUM000440	04/15/1992	SL100MHM	3 0	250.00	0.00	250.00	0.00	0.00	0.00	250.00
	DELL COMPUTER									
HUM000450	04/02/1993	SL100MHM	5 0	3,263.00	0.00	3,263.00	0.00	0.00	0.00	3,263.00
	COMPUTER SOFTWARE									
HUM000460	06/30/1993	SL100MHM	5 0	37,000.00	0.00	37,000.00	0.00	0.00	0.00	37,000.00
	VIDEO EQUIPMENT									
HUM000470	06/30/1993	SL100MHM	3 0	5,000.00	0.00	5,000.00	0.00	0.00	0.00	5,000.00
	COMPUTER									
HUM000530	08/20/1993	SL100MHM	3 0	2,350.75	0.00	2,350.75	0.00	0.00	0.00	2,350.75
	COMPAQ COMPUTER									
HUM000590	08/08/1994	SL100MHM	5 0	1,666.00	0.00	1,666.00	0.00	0.00	-1,666.00	0.00
	FURNITURE									
HUM000600	01/19/1995	SL100MHM	5 0	1,833.60	0.00	1,833.60	0.00	0.00	0.00	1,833.60
	COPIER BUYOUT									
HUM000630	01/20/1995	SL100MHM	5 0	1,647.00	0.00	1,647.00	0.00	0.00	0.00	1,647.00
	Computer and Printer									
HUM000730	06/30/1997	SL100MHM	5 0	4,298.68	0.00	4,298.68	0.00	0.00	0.00	4,298.68
	Telephone									
HUM000860	06/09/1998	AD100HY	7 0	2,200.00	314.29	1,414.30	314.29	0.00	0.00	1,728.59
	BOB GEHMAN COMPUTER AND ACCOUNTING COMPUTER									
HUM000890	06/30/1999	SL100MHM	3 0	4,925.00	0.00	4,925.00	0.00	0.00	0.00	4,925.00
	COMPUTER KEN HEATER									
HUM000900	09/08/1999	SL100HM	5 0	1,458.00	291.60	826.20	291.60	0.00	0.00	1,117.80
	COMPUTER AND 2 NEW MONITORS									
HUM000910	10/22/1999	SL100HM	5 0	1,971.00	394.20	1,051.20	394.20	0.00	0.00	1,445.40
	COMPUTER AND MONITOR									
HUM000930	11/22/1999	SL100HM	5 0	898.00	179.60	463.97	179.60	0.00	0.00	643.57
	LAUNDRY MACHINE									
HUM001050	03/28/2000	SL100MHM	15 0	6,300.00	420.00	945.00	420.00	0.00	0.00	1,365.00
	Computers									
HUM001100	12/31/2000	SL100MHM	5 0	5,773.00	1,154.60	1,731.90	1,154.60	0.00	0.00	2,886.50
	Digital Camera									
HUM001110	06/30/2001	SL100MHM	5 0	699.00	139.80	139.80	139.80	0.00	0.00	279.60
	Computer Upgrade									
HUM001170	04/30/1994	SL100FM	5 0	1,500.00	0.00	1,500.00	0.00	0.00	0.00	1,500.00
	Computer upgrade (Rob's)									
HUM001240	05/02/2002	SL100FM	5 0	1,223.95	244.79	40.80	244.79	0.00	0.00	285.59
	Telephone									
HUM001250	08/28/2002	SL100FM	10 0	1,479.25	135.60	0.00	135.60	0.00	0.00	135.60
	Digital Phone									
HUM001260	09/28/2002	SL100FM	10 0	989.44	82.45	0.00	82.45	0.00	0.00	82.45
	Dell database									
HUM001270	11/05/2002	SL100FM	10 0	10,591.34	706.09	0.00	706.09	0.00	0.00	706.09
	Plano									
HUM001280	01/16/2003	SL100FM	10 0	1,350.00	67.50	0.00	67.50	0.00	0.00	67.50
	HP Printer									
	03/27/2003	SL100FM	10 0	789.94	26.33	0.00	26.33	0.00	0.00	26.33
Less Disposals	Adjustment to eliminate cost values of disposed assets									
	-6,729.39									
<i>Subtotal: 1007 (36)</i>				176,839.82	4,448.35	154,167.96	4,448.35	0.00	-6,729.39	151,886.92
<i>Asset GL Acct #: 1029</i>										
81	Windows									
	10/01/2001	SL100MHM	40 0	51,261.00	1,281.53	961.14	1,281.53	0.00	0.00	2,242.67
82	Roofing Repairs									
	10/01/2001	SL100MHM	40 0	50,090.00	1,252.25	939.18	1,252.25	0.00	0.00	2,191.43
83	Repairs to Sprinkler System									
	10/01/2001	SL100MHM	40 0	2,500.00	62.50	46.87	62.50	0.00	0.00	109.37
84	Repairs to Sprinkler and Fire Alarm									

Asset ID	Placed in service	Depr Meth/Conv	Life Yr Mo	Book Cost	Depr & AFYD This Period	YEAR TO DATE				
						Beginning Accum Depr	Current Depr & AFYD	Net Sec 179/Sec 179A	Net Additions Deletions	Ending Accum Depr
<i>Asset GL Acct #: 1029</i>										
85	10/01/2001	SL100MHM	40 0	3,900.00	97.50	73.12	97.50	0.00	0.00	170.62
	Security Control Panel									
86	10/01/2001	SL100MHM	40 0	2,382.00	59.55	44.66	59.55	0.00	0.00	104.21
	Tamper and Pressure Switch									
97	10/01/2001	SL100MHM	40 0	1,007.00	25.18	18.87	25.18	0.00	0.00	44.05
	Boiler									
88	01/01/2002	SL100MHM	40 0	19,897.11	497.43	248.71	497.43	0.00	0.00	746.14
	Removal of HVAC									
89	10/01/2001	SL100MHM	40 0	5,962.00	149.05	111.79	149.05	0.00	0.00	260.84
	Elevator Repairs									
90	09/01/2001	SL100MHM	40 0	2,404.00	60.10	50.07	60.10	0.00	0.00	110.17
	Compressor									
91	10/01/2001	SL100MHM	40 0	1,240.00	31.00	23.25	31.00	0.00	0.00	54.25
	Engineering Services									
HUM000020	10/01/2001	SL100MHM	40 0	4,300.00	107.50	80.62	107.50	0.00	0.00	188.12
	1027 E. BALTIMORE STREET									
HUM000190	09/26/1990	SL100MHM	30 0	25,000.00	833.33	9,791.63	833.33	0.00	0.00	10,624.96
	FIRE ALARM									
HUM000260	12/31/1993	SL100MHM	10 0	4,000.00	400.00	3,400.00	400.00	0.00	0.00	3,800.00
	ROOF									
HUM000270	11/29/1994	SL100MHM	15 0	3,900.00	260.00	1,971.67	260.00	0.00	0.00	2,231.67
	FURNACE									
HUM000310	12/30/1994	SL100MHM	15 0	17,740.00	1,182.67	8,870.02	1,182.67	0.00	0.00	10,052.69
	FIRE ESCAPE									
HUM000320	05/02/1995	SL100MHM	10 0	8,602.00	860.20	6,164.77	860.20	0.00	0.00	7,024.97
	1029 E. BALTIMORE STREET									
HUM000640	01/05/1955	SL100MHM	40 0	36,000.00	0.00	36,000.00	0.00	0.00	0.00	36,000.00
	Kitchen Hood and Fire Surpressant Range Hood									
HUM000650	04/30/1997	SL100MHM	7 0	13,593.44	1,941.92	10,033.25	1,941.92	0.00	0.00	11,975.17
	Fire Alarm System									
HUM000660	05/01/1997	SL100MHM	7 0	10,050.00	1,435.71	7,417.84	1,435.71	0.00	0.00	8,853.55
	Signet Bank Building									
HUM000740	06/25/1997	SL100MHM	40 0	272,437.00	6,810.93	34,054.65	6,810.93	0.00	0.00	40,865.58
	Asbestos									
HUM000750	09/09/1997	AD100MM	10 0	5,440.00	544.00	2,606.67	544.00	0.00	0.00	3,150.67
	Roof Repair									
HUM000780	11/19/1997	AD100MM	15 0	13,915.00	927.67	4,290.47	927.67	0.00	0.00	5,218.14
	WINDOWS									
HUM000880	12/31/1998	SL100MHM	30 0	6,280.00	209.33	732.66	209.33	0.00	0.00	941.99
	11 HARDWOOD DOORS									
HUM000920	12/09/1999	SL100MHM	15 0	6,862.00	457.47	1,181.80	457.47	0.00	0.00	1,639.27
	NEW BOILER									
HUM001060	12/07/1999	SL100MHM	15 0	3,359.39	223.96	578.56	223.96	0.00	0.00	802.52
	Hot water heater									
HUM001230	06/30/2001	SL100MHM	15 0	4,945.00	329.67	329.67	329.67	0.00	0.00	659.34
	Sign's									
	05/21/2003	SL100FM	10 0	1,550.00	25.83	0.00	25.83	0.00	0.00	25.83
<i>Subtotal: 1029 (27)</i>				578,616.94	20,066.28	130,021.94	20,066.28	0.00	0.00	150,088.22
<i>Asset GL Acct #: 10291031</i>										
HUM000840	EMERGENCY SYSTEM DESIGN 1029 AND 1031									
	06/04/1999	SL100MHM	30 0	27,130.93	904.36	2,788.44	904.36	0.00	0.00	3,692.80
HUM000850	ENGINEERING AND ARCHITECT FEES									
	06/15/1999	SL100MHM	30 0	23,608.75	786.96	2,426.46	786.96	0.00	0.00	3,213.42
<i>Subtotal: 10291031 (2)</i>				50,739.68	1,691.32	5,214.90	1,691.32	0.00	0.00	6,906.22
<i>Asset GL Acct #: 1031</i>										
HUM000670	Asbestos Removal									
	09/09/1997	AD100MM	40 0	12,210.00	305.25	1,462.66	305.25	0.00	0.00	1,767.91
HUM000680	HVAC									

Asset ID	Placed in service	Depr Meth/Conv	Life Yr Mo	Book Cost	Depr & AFYD This Period	YEAR TO DATE			Ending Accum Depr	
						Beginning Accum Depr	Current Depr & AFYD	Net Sec 179/Sec 179A		
<i>Asset GL Acct #: 1031</i>										
HUM000690	01/01/1998	AD100MM	15 0	36,695.00	2,446.33	10,906.56	2,446.33	0.00	0.00	13,352.89
	Electrical and Engineering									
HUM000700	11/19/1997	AD100MM	15 0	5,651.00	376.73	1,742.38	376.73	0.00	0.00	2,119.11
	Showers									
HUM000710	05/28/1998	AD100MM	15 0	4,930.00	328.67	1,355.76	328.67	0.00	0.00	1,684.43
	Paint									
HUM000720	08/20/1997	AD100MM	15 0	5,934.00	395.60	1,928.55	395.60	0.00	0.00	2,324.15
	Insulation									
HUM000760	06/15/1998	AD100MM	40 0	4,200.00	105.00	424.38	105.00	0.00	0.00	529.38
	Materials and Labor									
HUM000790	07/15/1997	AD100MM	40 0	64,852.00	1,621.30	8,038.95	1,621.30	0.00	0.00	9,660.25
	CARPETING									
HUM000800	08/17/1998	SL100MHM	15 0	8,826.00	588.40	2,255.53	588.40	0.00	0.00	2,843.93
	BUILDING RENOVATIONS									
HUM001000	12/31/1998	SL100MHM	30 0	22,139.04	737.97	2,582.89	737.97	0.00	0.00	3,320.86
	BLINDS									
HUM001010	06/23/2000	SL100MHM	7 0	1,875.00	267.86	535.72	267.86	0.00	0.00	803.58
	CONTRACT AND PERMITS - J.A. AMMON PHASE 1									
HUM001020	12/31/1999	SL100MHM	40 0	13,220.15	330.50	826.25	330.50	0.00	0.00	1,156.75
	BUILDING RENOVATIONS - PHASE 1 CONTRACTS, FEES AND PERMITS									
HUM001070	12/31/1999	SL100MHM	40 0	402,174.31	10,054.36	25,135.90	10,054.36	0.00	0.00	35,190.26
	1031 - Shade Construction									
HUM001080	07/27/2000	SL100MHM	40 0	44,139.14	1,103.48	2,115.00	1,103.48	0.00	0.00	3,218.48
	1031 - hardware, blinds and plaque									
	12/31/2000	SL100MHM	15 0	4,241.59	282.77	424.16	282.77	0.00	0.00	706.93
<i>Subtotal: 1031 (14)</i>				631,087.23	18,944.22	59,734.69	18,944.22	0.00	0.00	78,678.91
<i>Asset GL Acct #: 1050</i>										
HUM000810	26 ILC COMPUTERS									
	06/17/1999	SL100HM	5 0	26,301.01	5,260.20	15,780.60	5,260.20	0.00	0.00	21,040.80
HUM000820	LIGHTING - ILC									
	08/07/1998	SL100MHM	15 0	1,405.00	93.67	366.87	93.67	0.00	0.00	460.54
HUM000830	WORKSTATIONS - MILLWORK - ILC									
	02/23/1999	SL100MHM	15 0	13,180.00	878.67	2,928.90	878.67	0.00	0.00	3,807.57
HUM000940	DOOR FOR ILC									
	07/01/1999	SL100MHM	5 0	86.06	17.21	51.63	17.21	0.00	0.00	68.84
HUM000950	27 CHAIRS FOR ILC									
	07/22/1999	SL100MHM	7 0	4,076.00	582.29	1,698.34	582.29	0.00	0.00	2,280.63
HUM000960	TELEPHONE, PARTS, AND LABOR FOR ILC									
	12/12/1999	SL100MHM	7 0	764.00	109.14	281.95	109.14	0.00	0.00	391.09
HUM000970	ILC TABLES									
	08/16/1999	SL100MHM	7 0	437.00	62.43	176.88	62.43	0.00	0.00	239.31
HUM000980	ILC VERTICALS AND VALANCES									
	07/20/1999	SL100MHM	7 0	1,169.00	167.00	487.08	167.00	0.00	0.00	654.08
HUM000990	COMPUTER EQUIPMENT									
	07/26/1999	SL100MHM	5 0	109.68	21.94	63.99	21.94	0.00	0.00	85.93
HUM001030	GED SOFTWARE - ILC									
	12/27/1999	SL100MHM	5 0	5,383.92	1,076.78	2,691.95	1,076.78	0.00	0.00	3,768.73
<i>Subtotal: 1050 (10)</i>				52,911.67	8,269.33	24,528.19	8,269.33	0.00	0.00	32,797.52
<i>Asset GL Acct #: 1060</i>										
HUM001180	Donor Software - Blackbaud									
	07/23/2002	SL100FM	5 0	12,747.50	2,549.50	0.00	2,549.50	0.00	0.00	2,549.50
HUM001190	MIPS - CG Solutions									
	12/30/2002	SL100FM	5 0	5,847.50	682.21	0.00	682.21	0.00	0.00	682.21
HUM001200	Set up of Blackbaud software									
	03/25/2003	SL100FM	5 0	7,897.50	526.50	0.00	526.50	0.00	0.00	526.50
HUM001210	Set up of MIPS - CG Solutions									
	04/25/2003	SL100FM	5 0	2,229.50	111.48	0.00	111.48	0.00	0.00	111.48

Asset ID	Placed in service	Depr Meth/Conv	Life Yr Mo	Book Cost	Depr & AFYD This Period	YEAR TO DATE			Ending Accum Depr	
						Beginning Accum Depr	Current Depr & AFYD	Net Sec 179/Sec 179A		
Subtotal: 1060 (4)				28,722.00	3,869.69	0.00	3,869.69	0.00	0.00	3,869.69
Grand Total				1,952,609.32	77,634.39	425,344.24	77,634.39	0.00	-34,575.07	468,403.56

F/S

Construction in Progress 116,516.7  
 Total Fixed Assets 2,068,676 F/S

FORM 990 GAIN (LOSS) FROM PUBLICLY TRADED SECURITIES STATEMENT 1

DESCRIPTION	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	NET GAIN OR (LOSS)
PUBLICLY TRADED SECURITIES	138,918.	165,225.	0.	-26,307.
TO FORM 990, PART I, LINE 8	138,918.	165,225.	0.	-26,307.

FORM 990 OTHER CHANGES IN NET ASSETS OR FUND BALANCES STATEMENT 2

DESCRIPTION	AMOUNT
UNREALIZED GAIN ON INVESTMENTS	36,817.
TOTAL TO FORM 990, PART I, LINE 20	36,817.

FORM 990 OTHER EXPENSES STATEMENT 3

DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING
CULTIVATION AND ACQUISITION	309,932.			309,932.
RESIDENTS' ALLOWANCE AND ASSISTANCE	8,043.	8,043.		
REPAIR AND MAINTENANCE - EQUIPMENT	11,157.	1,867.	9,090.	200.
DRUG TESTING	7,222.	7,222.		
EDUCATIONAL MATERIALS	1,541.	1,038.	18.	485.
FOOD PURCHASES	90,808.	90,808.		
INSURANCE	36,460.	34,272.	1,458.	730.
PERMITS, LICENSES AND TAXES	9,074.	205.	8,669.	200.
REPAIRS & MAINTENANCE- BLDG	38,230.	35,935.	1,530.	765.
VEHICLE EXPENSES	26,996.	26,996.		
UTILITIES	83,277.	78,279.	3,332.	1,666.
DONATED MERCHANDISE DISTRIBUTION	235,341.	235,341.		
DONATED FOOD DISTRIBUTION	252,908.	252,908.		

PROFESSIONAL & CONTRACTUAL SERVICES	49,046.		30,546.	18,500.
ANNUITY INTEREST EXPENSE	1,344.	1,344.		
BANK AND INVESTMENT CHARGES	23,740.		23,740.	
MEMBERSHIPS & SUBSCRIPTIONS	2,345.		1,963.	382.
TRAVEL AND ENTERTAINMENT BANQUET	4,044.	2,507.	890.	647.
ADVERTISING	50,774.	50,774.		
CAMPS	8,400.	3,530.	4,870.	
SPECIAL EVENTS	19,340.	19,340.		
BOARD EXPENSES	2,670.	2,670.		
	1,558.	779.	779.	
<b>TOTAL TO FM 990, LN 43</b>	<b>1,274,250.</b>	<b>853,858.</b>	<b>86,885.</b>	<b>333,507.</b>

FORM 990 STATEMENT OF ORGANIZATION'S PRIMARY EXEMPT PURPOSE STATEMENT 4  
PART III

EXPLANATION

EDUCATE AND ENGAGE THE PUBLIC IN PROVIDING HELP FOR THE HOMELESS THROUGH PROGRAMS DESIGNED TO MEET PHYSICAL, PSYCHOLOGICAL, SOCIAL & SPIRITUAL NEEDS

FORM 990 NON-GOVERNMENT SECURITIES STATEMENT 5

SECURITY DESCRIPTION	CORPORATE STOCKS	CORPORATE BONDS	OTHER PUBLICLY TRADED SECURITIES	OTHER SECURITIES	TOTAL NON-GOV'T SECURITIES
COMMON STOCK	226,166.				226,166.
CORPORATE BONDS		47,323.			47,323.
MUTUAL FUNDS			113,194.		113,194.
<b>TO 990, LN 54 COL B</b>	<b>226,166.</b>	<b>47,323.</b>	<b>113,194.</b>		<b>386,683.</b>



FORM 990

PART V - LIST OF OFFICERS, DIRECTORS,  
TRUSTEES AND KEY EMPLOYEES

STATEMENT 9

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE	
			BEN PLAN CONTRIB	EXPENSE ACCOUNT
ROBERT GEHMAN 1029 EAST BALTIMORE STREET BALTIMORE, MD 21202	C.E.O. & BOARD MEMBER 40	70,477.	0.	0.
CHARLES BALINT 1029 EAST BALTIMORE STREET BALTIMORE, MD 21202	BOARD MEMBER 0.	0.	0.	0.
STUART ERDMAN 1029 EAST BALTIMORE STREET BALTIMORE, MD 21202	PRESIDENT 0.	0.	0.	0.
CHARLES HALLIS 1029 EAST BALTIMORE STREET BALTIMORE, MD 21202	BOARD MEMBER 0.	0.	0.	0.
WILLIAM HILDEBRAND 1029 EAST BALTIMORE STREET BALTIMORE, MD 21202	BOARD MEMBER 0.	0.	0.	0.
ANTHONY KAMEEN, M.D. 1029 EAST BALTIMORE STREET BALTIMORE, MD 21202	BOARD MEMBER 0.	0.	0.	0.
TRISHA BENTZ 1029 EAST BALTIMORE STREET BALTIMORE, MD 21202	BOARD MEMBER 0.	0.	0.	0.
JIM MCFAUL 1029 EAST BALTIMORE STREET BALTIMORE, MD 21202	SECRETARY 0.	0.	0.	0.
DAVID MCQUAY 1029 EAST BALTIMORE STREET BALTIMORE, MD 21202	BOARD MEMBER 0.	0.	0.	0.
RANDY BRASHEARS 1029 EAST BALTIMORE STREET BALTIMORE, MD 21202	BOARD MEMBER 0.	0.	0.	0.
DEBBIE WOODEN 1029 EAST BALTIMORE STREET BALTIMORE, MD 21202	BOARD MEMBER 0.	0.	0.	0.

MARK VASELKIV 1029 EAST BALTIMORE STREET BALTIMORE, MD 21202	VICE PRESIDENT 0.	0.	0.	0.
ROBERT WATERS 1029 EAST BALTIMORE STREET BALTIMORE, MD 21202	TREASURER 0.	0.	0.	0.
DAVID B. WOO 1029 EAST BALTIMORE STREET BALTIMORE, MD 21202	BOARD MEMBER 0.	0.	0.	0.
TOTALS INCLUDED ON FORM 990, PART V		<u>70,477.</u>	<u>0.</u>	<u>0.</u>

FORM 990 PART VIII - RELATIONSHIP OF ACTIVITIES TO ACCOMPLISHMENT OF EXEMPT PURPOSES STATEMENT 10

LINE	EXPLANATION OF RELATIONSHIP OF ACTIVITIES
93	HELPING UP MISSION, INC. IS A NON-PROFIT ORGANIZATION WHOSE PURPOSE IS TO EDUCATE AND ENGAGE THE PUBLIC IN PROVIDING HELP FOR THE HOMELESS THROUGH PROGRAMS DESIGNED TO MEET UNIQUE PHYSICAL, PSYCHOLOGICAL, SOCIAL AND SPIRITUAL NEEDS. ALL MONIES ARE USED FOR THAT PURPOSE.
103	SAME AS ABOVE

SCHEDULE A	OTHER INCOME			STATEMENT 11
DESCRIPTION	2001 AMOUNT	2000 AMOUNT	1999 AMOUNT	1998 AMOUNT
MISCELLANEOUS	<u>7,953.</u>	<u>3,059.</u>	<u>4,669.</u>	<u>9,440.</u>
TOTAL TO SCHEDULE A, LINE 22	<u>7,953.</u>	<u>3,059.</u>	<u>4,669.</u>	<u>9,440.</u>

# Application for Extension of Time To File an Exempt Organization Return

▶ File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only Part I and check this box
- If you are filing for an **Additional (not automatic) 3-Month Extension**, complete only Part II (on page 2 of this form).

**Note:** Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

## Part I Automatic 3-Month Extension of Time - Only submit original (no copies needed)

**Note:** Form 990-T corporations requesting an automatic 6-month extension - check this box and complete Part I only

All other corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file income tax returns. Partnerships, REMICs and trusts must use Form 8736 to request an extension of time to file Form 1065, 1066, or 1041.

Type or print	Name of Exempt Organization <b>THE HELPING UP MISSION, INC.</b>	Employer identification number <b>52-0635090</b>
	Number, street, and room or suite no. If a P.O. box, see instructions. <b>1029 E. BALTIMORE STREET</b>	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>BALTIMORE, MD 21202</b>	

Check type of return to be filed (file a separate application for each return):

- |  |   |                                    |
|--|---|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation)                 | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL         | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ         | <input type="checkbox"/> Form 990-T (trust other than above)      | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF         | <input type="checkbox"/> Form 1041-A                              | <input type="checkbox"/> Form 8870 |

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a **Group Return**, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_. If this is for the **whole group**, check this box . If it is for part of the group, check this box  and attach a list with the names and EINs of all members the extension will cover.

1 I request an automatic 3-month (6-month, for 990-T corporation) extension of time until FEBRUARY 17, 2004 to file the exempt organization return for the organization named above. The extension is for the organization's return for:

▶  calendar year \_\_\_\_\_ or

▶  tax year beginning JUL 1, 2002, and ending JUN 30, 2003.

2 If this tax year is for less than 12 months, check reason:  Initial return  Final return  Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions ..... \$ \_\_\_\_\_

b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit ..... \$ \_\_\_\_\_

c **Balance Due.** Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions ..... \$ N/A

### Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature ▶ Sori D. English, CPA Title ▶ \_\_\_\_\_ Date ▶ 11/10/03

LHA For Paperwork Reduction Act Notice, see instruction